



LOS ANGELES COUNTY COMMISSION ON HIV

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While not required of meeting participants, signing-in constitutes public notice of attendance. Presence at meetings is recorded solely based on sign-in sheets, and not signing-in constitutes absence for Commission members. Only members of the Commission on HIV are accorded voting privileges, thus Commissioners who have not signed in cannot vote. Sign-in sheets are available upon request.

COMMISSION ON HIV MEETING MINUTES August 13, 2009

Approved
10/8/2009

MEMBERS PRESENT	PUBLIC	PUBLIC (Cont.)	COMMISSION STAFF/CONSULTANTS
Carla Bailey, <i>Co-Chair</i>	Robert Aguayo	Frank Manescalchi	Julie Cross
Anthony Braswell, <i>Co-Chair</i>	Joaquin Agustin	Ingrid Marchus	Erinn Cortez
Everett Alexander	Diane Alarcón	Victor Martines	Carolyn Echoles-Watson
Sergio Aviña	Martha Aldrete	Arcadio Martinez	Dawn McClendon
Al Ballesteros	Mohammad Aminza	Elmer Martinez	Jane Nachazel
Robert Butler	Rafael Andoza	Miguel Martinez	Glenda Pinney
Fredy Ceja	Gustavo Arguelles	Rigoberto Martinez	Doris Reed
Eric Daar	Ernesto Auja	Roberto Melendez	James Stewart
Nettie DeAugustine	Miguel Ayala	Elizabeth Mendia	Craig Vincent-Jones
Whitney Engeran-Cordova	Albert Barragan	Jesús Mendoza	Nicole Werner
Douglas Frye	Jeanette Bass	Meyer Miller	
David Giugni	Michelle Bautista	Philip Mojica	
Terry Goddard	Robert Boller	Karen Morris	OAPP/HIV EPI STAFF
Jeffrey Goodman	Edith Brito	Suyapa Muñoz	Chi-Wai Au
Michael Johnson	Bill Brown	Luenia Navarro	Kyle Baker
Lee Kochems	Jennifer Caldwell	Larry Neria	Maxine Franklin
Bradley Land	Vanessa Cardona	Ruel Nollado	Michael Green
Ted Liso	Pamela Chiang	Chico Norwood	Mary Orticke
Anna Long	Brietta Clark	Melissa Nuestra	Carlos Vega-Matos
Manuel Negrete/James Chud	Carolyn Colao	Trip Oldfield	Juhua Wu
Everardo Orozco/Ron Osorio	Kengi Curr	Joanne Oliver	Dave Young
Dean Page	Phil Curtis	Cathy Olufs	
Angélica Palmeros	Mark Davis	Herbeth Osorio	
Mario Pérez	Kimberly DeAzcul	Karen Parker	
Karen Peterson	Cuaultievnoc Diaz	Diane Perez	
Jennifer Sayles	Mirna Diaz	José Perez	
Stephen Simon	Myrna Diaz	Levith Puga	
Robert Sotomayor	Thanh Doan	Jesús Reyes	
Fariba Younai	Richard Eastman	Ruben Reyes	
	Juan Escobedo	Terry Reynolds	
	Miguel Fernandez	Mickie Robbins	
	Susan Forrest	Nicholas Rocca	
	Fanny Garcia	David Rodas	
	Victor Mandoza Garcia	Jose Rodas	

Commission on HIV Meeting Minutes

August 13, 2009

Page 2 of 9

MEMBERS ABSENT	PUBLIC (Cont.)	PUBLIC (Cont.)	
Carrie Broadus	Alberto Gomez	Rene Rodriguez	
Quentin O'Brien	Sonia Gomez	Tania Rodriguez	
Jenny O'Malley	Graciela Gonzalez	Julian Sanchez	
Chris Villa	Norma Guerra	Susana Santana	
Kathy Watt	Michael Harms	David Schulman	
	Paul Hebblethwaite	Scott Singer	
	Philip Hendricks	Terry Smith	
	Guerlee Hernandez	Patricia Soz	
	Ruth James	Lambert Talley	
	Karen Karlsson	Margarita Tinajero	
	Richard Kearns	Frank Vargas	
	AJ King	Justo Velasquez	
	Matt Kuuz	Rose Veniegas	
	Kristelle Kwall	Maria Zepeda	
	Maria Liera		

1. **CALL TO ORDER:** Mr. Braswell called the meeting to order at 9:02 am and introduced new Commissioners Stephen Simon, Karen Peterson, Jennifer Sayles and Fredy Seja.
 - A. **Roll Call (Present):** Alexander, Braswell, Ceja, DeAugustine, Giugni, Goddard, Goodman, Johnson, Kochems, Land, Liso, Long, Negrete, Orozco, Page, Peterson, Sayles, Simon, Sotomayor
2. **APPROVAL OF AGENDA:**
MOTION 1: Approve the Agenda Order (*Passed by Consensus*).
3. **APPROVAL OF MEETING MINUTES:**
MOTION 2: Approve the minutes from the July 9, 2009 Commission on HIV meeting (*Passed by Consensus*).
4. **CONSENT CALENDAR:**
MOTION 3: Approve the Consent Calendar with Motion 4 pulled for later consideration and Motion 6 withdrawn (*Passed by Consensus*).
5. **PARLIAMENTARY TRAINING:** Mr. Stewart noted the two-minute speaking limit. All have an opportunity to speak once before anyone speaks twice. The order of comments after presentations is: 1) Commissioner questions, 2) public comment, followed by 3) Commissioner comments. He noted only amendments, not comments, are required to change a motion.
6. **PUBLIC COMMENT, NON-AGENDIZED:**
 - Mr. Kearns reported that PWH 50+ were 10% of the national HIV+ population in 2005 when he moved to an assisted care facility, are now 25% to 33% and expected to be 60% in five years. Gay seniors are twice as likely to live alone, half as likely to have private insurance and ten times less likely to have a caretaker. He plans a website and conference on consumer experiences in conjunction with the mid-September National HIV/AIDS and Aging day. More information is on his website, www.AIDS-write.org.
 - Mr. Eastman is planning a medical marijuana rally 10/10/2009, Lafayette Park, Washington, D.C. Cleve Jones is planning a National Gay and Lesbian march 10/11/2009 in the Capitol. Both will address HIV/AIDS. He urged Commissioners to pressure State and Federal representatives at all levels for more funds.
7. **COMMISSION COMMENT, NON-AGENDIZED:**
 - Msrs. Page and Orozco reported that news coverage for the vigil was good, but more consumers should attend. On behalf of the Executive Committee, Mr. Braswell thanked staff for their continued work on budget issues throughout the summer and acknowledged vigil support from Commissioners, Bienestar, APLA and AHF.
 - Mr. Johnson counseled that although budget cuts facts are ugly and hard choices must be made, the discussion should remain respectful.

- Mr. Land reported that Dr. Terry Grand, former Commissioner and long-term survivor, has been ill with pneumonia. He was a founder of Act-Up Los Angeles in 1983 and part of the first candlelight vigil in the country.
- ➡ The Executive Committee will prepare an acknowledgement of staff work.

8. PUBLIC/COMMISSION COMMENT FOLLOW-UP: There were no comments.

9. CO-CHAIRS' REPORT: Mr. Braswell reported on the Remote Area Medical (RAM) event at the Inglewood Forum through 8/18/2009. A broad range of medical, eye and dental services are available free on a first-come basis. Doors open at 5:30 am.

10. EXECUTIVE DIRECTOR'S REPORT:

- Mr. Vincent-Jones thanked all involved in the rally/vigil planning and indicated that the planning represented a coalition of the willing who dropped everything to plan and implement the events. In particular, he noted that Bienestar generated significant vigil attendance. Efforts overall have been selfless and cooperative under compressed time frames.
- He noted Spanish translators are available for all Commission meetings, as long as the Commission offices are contacted at least two days in advance. He cautioned that monolingual Spanish speakers shouldn't have to rely on the kindness of others to understand the meeting, and should be able to expect that they're provided tools to follow the entire meeting.
- ➡ Form Community Mobilization Task Force to lay groundwork for future events/vigils. Those interested in participating should contact Mr. Vincent-Jones.

11. STATE OFFICE OF AIDS (OA) REPORT: Ms. Taylor has left the Office of AIDS and transferred to the State's Office of Emergency Services. As a result, she has left the Commission. OA will recommend a new representative for membership.

12. OFFICE OF AIDS PROGRAMS AND POLICY (OAPP) REPORT:

- Mr. Pérez reported receipt of the annual CDC Cooperative Agreement Resources guidance. Each year OAPP confirms resource availability and compares resources to those available in prior cycles. Michael Green, Director, Planning and Research, and Sophia Rumanes, Director, Prevention, will spearhead application work.
- With no official OA budget implementation plan, OAPP is basing recommendations on pre-planning done based on estimated cuts, briefings with the Department of Public Health, and discussions with the Commission, the Prevention Planning Committee (PPC) and, more recently, with the Commission's Priorities and Planning Committee.

14. HIV EPIDEMIOLOGY PROGRAM REPORT:

- Dr. Frye, Director, reported HARS surveillance has ended with the last cases entered 6/30/2009. New eHARS surveillance will go live in one or two weeks to allow for transition to the more complex system. Case research continues unabated.
- Los Angeles and San Francisco are the only counties with their own systems. Others will have a virtual private network connection by April 2010. Only Los Angeles and San Francisco County cases will count for the calendar year 2009 as State emergency regulations to allow electronic transfer of cases from other counties is not likely to be approved until April 2010. The State has not analyzed the cost of not reporting cases from the 59 smaller jurisdictions.
- Dr. Frye said Michelle Roland, Director, OA, has told all 61 jurisdictions that any surveillance cuts will be at the State level. He praised Commission and OAPP surveillance prioritization. He is on a CDC external review steering committee which found surveillance is the best program evaluation method.
- ➡ Expand the Commission's Los Angeles County Surveillance Financial Model to reflect the entire State and report under Public/Commission Follow-Up. The model predicted that a cut to LA County's surveillance could cost the County up to \$11 million in Part A funds and the State up to \$20 million in Part B funds.

15. PREVENTION PLANNING COMMITTEE REPORT:

- Mr. Giugni reported that Dr. Green has presented the OAPP recommendations regarding State budget cuts at the PPC meeting. The Executive Committee had already offered input to OAPP, so the PPC accepted the report without vote.
- USC School of Social Work staff presented on HIV prevention with social networks and social networking technology. Trista Bingham reported on preliminary findings from the National HIV Behavioral Study.

16. BENEFITS REPORT:

A. Impact of Other State Budget Cuts:

- Ms. Cross presented an overview on the effect of other State cuts that impact PWH.
- Supplemental Security Income (SSI/SSP) has been reduced three times this year. On 10/1/2009, the single rate will be lowered \$5 more and married couples rate will go down to the Federal minimum. On 1/2011, the State automatic cost of living increase (COLA) will be eliminated. The Federal COLA is not affected.

- The Cash Assistance Program for Immigrants (CAPI) provides cash and food stamps for seniors and those with disabilities who do not qualify for SSI. CAPI has been retained with a \$5 cash reduction on 10/1/2009.
- The Medi-Cal budget is based on expected receipt of \$1 billion in stimulus funds. It includes \$323 million in unidentified General Fund savings. More savings are expected from: expanded anti-fraud efforts, \$46.8 million; Medi-Cal pharmacy reforms, \$66 million; and County administrative cuts, \$60.6 million—a “blue pencil” cut that may affect access, e.g., due to staff cuts. Payments to Disproportionate Share Hospitals (DSH), which serve low-income clients, will be cut 10%.
- Preparations are underway to rewrite the Medi-Cal Managed Care Waiver which provides the State’s authority to offer services through managed care programs. It is due to sunset and the State expects savings through restructuring.
- In-Home Supportive Services (IHSS) provides homemaker and paramedical support through local counties with the IHSS Public Authority Administration, which was cut \$13.3 million. Administrative changes designed to save funds include \$10 million to prevent fraud, tighter background checks, timesheet review and unannounced home visits.
- IHSS clients receive a functional index score from 1 (independent) to 6 (100% dependent on nursing care). Those with scores of 3 or 4, which cover symptoms/side effects like fatigue and memory loss, will lose homemaker services. Those who score 1 or 2, which covers memory impairment, will lose all IHSS services, but some clients may be grandfathered.
- IHSS Share-Of-Cost will rise for about 8,000 clients as the subsidy is cut for the difference between the \$620 Medi-Cal and \$845 SSI income triggers. Many PWH combine IHSS/Home-Based Care, so they will be impacted by cuts to both.
- Cuts have been made based on assumed efficiencies, so an assessment was not made on the potential need for additional Medi-Cal nursing home beds due to cuts. Medi-Cal providers cannot legally discontinue service if an eligible client cannot pay Share-Of-Cost. The expense should be handled according to the providers’ policy for uncollectable bills.
- Drug and Alcohol Program provider rates have been cut 10%, \$8.8 million. The Proposition 36 Substance Abuse Offender Treatment Program has been cut from \$108 to \$18 million, but the law still requires judges to refer people to treatment. Stimulus funds may backfill up to \$54 million, but that is not assured.
- The budget authorizes the Governor to pursue procurement for a private vendor to centralize eligibility screening for CalWORKS, Medi-Cal and food stamps. Presented as a cost-saving measure, it has not been successful in other states. Planning bodies need to follow development of any new system to assure access to services is not lost.
- Other budget reductions are: Proposition 99, funds shifted from several programs including \$6.6 million from the Major Risk Insurance Program; Adult Day Health Care, services limited to three days per week saving \$26.8 million; Healthy Families, \$174 million reduction; and Mental Health, \$92 million reduction especially to managed care services. Also, State employee furlough days are increased to three per month and policy changes are planned for CalWORKS in 2011.
- Ms. Cross noted CareHIPP remains. A County insurance continuation pilot is being planned for those losing services.
- She noted some think tanks, especially Health Access at www.healthaccess.org, plan to track the impact of cuts.

17. STANDING COMMITTEE REPORTS:

A. Priorities & Planning (P&P) Committee:

1. *Revised FY 2009 Allocations:*

- Mr. Braswell complimented P&P Co-Chairs and Committee for their dedication over several months. Commissioners stated conflicts of interest.
- Mr. Goodman said revisions are proposed for FY 2009, which began 3/1/2009 to address State budget cuts retroactive to 7/1/2009. The County encumbers \$31,000 per day (about \$1 million per month) for every day that existing contracts are left intact and budget cuts are not implemented.
- All State General Funds were cut from all HIV/AIDS programs except AIDS Drug Assistance Program (ADAP) and core surveillance activities. Annualized cuts to OAPP-funded programs total \$11,547,816 in: Health Education and Risk Reduction (HE/RR), \$5,353,536; Counseling and Testing, \$1,101,259; Therapeutic Monitoring Program (TMP), \$3,000,000; and Early Intervention Programs, \$2,093,123. County providers directly funded by OA will be cut \$3,000,000+.
- Commission authority only pertains to Ryan White Parts A/B but, due to unprecedented cuts, OAPP worked with both the Commission and the PPC to develop an overall plan to stem losses while maintaining essential services.
- Full funding is recommended for: Case Management, Home-based; Case Management, Medical; Case Management, Transitional; HIV Counseling and Testing; Hospice; Language/Interpretation; Medical Outpatient/Specialty; Mental Health, Psychiatry; Mental Health, Psychotherapy; Nutrition Support; Oral Health; Substance Abuse, Residential and Treatment; and Residential, Transitional while working with HOPWA to maximize service efficiency.
- Partial funding is recommended for: 80% of HE/RR, \$4.3 million; 48% of Early Intervention Programs (EIP), \$1 million, while using consolidation and merger of some contracts to increase efficiency; and 75% of TMP, \$2.2 million. OAPP expects to reduce TMP without impacting health outcomes through more efficient voucher use and

Commission on HIV Meeting Minutes

August 13, 2009

Page 5 of 9

pressuring Public Health Labs to lower fees. OAPP will pay for TMP this program year with the recent \$1 million increase to Medical Outpatient allocated by the Commission following the FY 2009 Ryan White award.

- Savings of \$2.9 million are planned with cuts to OAPP and Commission operational and administrative budgets, and shifting FY 2009 Part A Oral Health costs to the Minority AIDS Initiative rollover (\$500,000).
- Recommended contract reductions, with a 30-day notice after Board approval for ended contracts, are as follows:

Service Category	Federal Year 19 Contracts	Recommendations/Rationale
Legal Services ¹	(\$370,443) *	End contract.
Peer Support ¹	(\$404,965) *	End contract.
Provider Training ¹	(\$168,888)	End contract to fund direct services. Training can be provided in-house.
Capacity Building ¹	(\$600,000) *	End contracts to fund direct services.
Client Advocacy ¹	(\$242,000) *	Cut contract by 50%; maintain HIV/LA online directory, reduce print run.
Social Marketing	(\$800,000) *	End contract or pay partially through other non-care funding for direct services.
Treatment Education ¹	(\$1,451,895) *	End contracts, and, per FY 2010 allocation, fold treatment education services into medical outpatient/coordination.
Medical Nutrition Therapy ¹	(\$326,871) *	End contracts and fold services into medical outpatient as possible.
Case Management, Psychosocial ¹	(\$800,000)	Eliminate the NCC-funded amount, but retain RW allocation.
Transportation ¹	(\$200,000)	Implement more strict client and financial eligibility rules and screening, reduce the number of bus pass distributors to only medical providers, and reduce taxi use, effective 10/1/2009.
Community Mobilization Initiative (CMI)	(\$220,000) *	Indefinite postponement of RFP.
Total Funding Cuts	(\$5,985,052)	Available funds to preserve essential services affected by State cuts.

¹ Contract/funding terms cross fiscal years, so funding adjustments do not reflect expenditures prior to 7/1/2009.

* Indicates full contract amount for a 12-month period.

- The plan reflects OAPP and PPC recommendations with one adjustment voted during P&P deliberations on 8/4-5/2009. The final recommendation holds harmless Mental Health, Psychotherapy, and funds the original 20% proposed reduction by increasing the Social Marketing reduction from 50% to 100%.
- Mr. Goodman said P&P adopted the full plan rather than specific Ryan White category percentages. That eases administrative burden and provides some latitude to make these mid-year adjustments. That approach was agreed to by OAPP who agreed to adhere to the plan adopted by the Commission, as long as service categories were not specifically aligned to funding sources. Plan review confirms the 75% care/25% support Ryan White requirement is maintained. Percentages will be developed for the application. He noted that the actual amounts may need to be revised once the plan is approved by the Board as actual implementation is worked out.
- Mr. Pérez, Director, OAPP, said response continues to evolve, e.g., OAPP is working with the City of Long Beach to address cuts. Ms. DeAugustine said the City is OA-funded for its EIP and St. Mary's Medical Center for many services. Cuts are expected to be 50%-100% of funds for services used by over 1,500 PWH.
- Mr. Pérez said \$8.7 million in HE/RR contracts sent to the Board in June were later held and existing contracts extended for 90 days. This plan will allow the new contracts to go forward 10/1/2009 at a reduced level.
- As the plan is in annual figures, contract savings assuming mid-September implementation are about \$3.5 million leaving a gap of about \$2.5 million. Any additional funds will first address the gap.
- Mr. Engeran-Cordova noted HIV/AIDS Federal, State and local funding streams form a complex, interrelated system. He complimented OAPP's work in collaborating with its community partners to develop the plan.

- Dr. Long reported the County overall has suffered both Federal and State cuts. Public Health NCC was cut twice last year and again this year. OAPP has been held harmless to date while other programs were cut. The County has also lost about 50% of Proposition 36 funds, as well as cuts to children's medical services.

Public Comment:

- Mssrs. Curr, Harms, Manescalchi, Vargas and Neria, and Ms. Bass and James, advocated for Psychosocial Case Management (CM) relating their positive experiences with the service at Northeast Valley Health Corporation.
- Ms. Cardona, Women Alive, suggested moving \$5 million from prevention to re-fund services like Peer Support and Treatment Education that support care entry and adherence.
- Ms. Guerra, Women Alive, related how she benefitted from Peer Support and now coordinates it. She said Peer Support is critical in addressing isolation and stigma, especially among women.
- Mssrs. Pérez, Garcia, Agustin, Puga, Reyes, Melendez and Escobedo and Ms. Diaz, Liera and Tinajero spoke in support of Peer Support, citing their support group experiences at Bienestar.
- Mr. Martinez, Bienestar, noted that clients do not always know the service categories—only that they need help in their language, culture and sexual orientation. Psychosocial CM, Peer Support and Treatment Education, he reported, address those needs.
- Mr. Mendoza advocated Peer Support, Treatment Education and Nutrition Support.
- Ms. Aldrete, Serra Project/Aid for AIDS, is a Program Manager at one of four group homes and reported that Peer Support groups are essential for the women in her programs.
- Ms. Olufs, Center for Health Justice, acknowledged the inevitability of cuts, but felt she must still advocate for Peer Support and Treatment Education. Their County Jail Transitional Case Managers struggle to arrange appropriate services, and it will be hard for them to absorb the specialized work of support services.
- Mr. Rodas expressed his support for residential and legal services, and noted the positive impact services from the Serra Project and HALSA have had on him.
- Ms. Karlsson, President, Board of Directors, HALSA, pointed out that HALSA is the only agency dedicated to providing free legal services for PWA, and indicated that HALSA may close by end of year if the contracts are cut—impacting immigration, public benefits and discrimination programs. She said that HALSA was requesting an extension to meet obligations to current clients and restructure.
- Ms. Clark, Professor, Loyola Law School, said she teaches and writes on health care law with a focus on barriers. She knows budgeting requires compartmentalization of services, but legal services are proven to reduce barriers to medical care like in provider discrimination, public benefits access, housing, employment and immigration status.
- Mr. Schulman, Deputy City Attorney, City of Los Angeles, said the City pioneered HIV legal services and just published a *Georgetown Poverty Review* article on its work and medical-legal partnerships in Boston as a new specialty, Public Health Legal Services. He asked to increase the Client Advocacy cut from 50% to 100% with the \$242,000 moved to Legal Services reducing that cut from 100% to 66%. The City should be able to assume the financial obligations, he suggested, in March 2010.
- Ms. Forrest, Behavioral Health Services, indicated that the community may have to return to its early days where we supported each other.

Commission Comment:

- Mr. Braswell talking of how the safety net we built is shredding beneath our feet. It would, he stipulated, result in the loss of services and colleagues who have dedicated their careers to HIV/ AIDS services, but the community could survive it by working together. He expressed pride in his colleagues—all volunteers—who did not shirk their responsibilities in bad times, and expressed hope that the audience understood they were listened to.
- Mr. Engeran-Cordova supported the plan. Speakers were moving, but funds are not there to keep the system the same. Other State areas are in worse straits, he reported. He praised the Commission, PPC and OAPP collaboration, and for voluntarily taking administrative cuts. This collaboration should be the model.
- Mr. Butler said, as a Commissioner, he supports the plan, which, he believes, moves us closer to the Medical Care Coordination framework. He expressed that he wants to maintain services, but acknowledge that volunteers may need to lead them.
- Regarding NCC, Mr. Pérez said the Ryan White Part A Maintenance of Effort (MOE) prohibits reduction. MOE was \$15.901 million for about 17 years. The County agreed to increasing it to \$17.3 million two years ago. HRSA sometimes allows a one-year emergency increase, but the County increase was in two consecutive years making \$17.3 million the new MOE. It is unlikely the County would risk increasing NCC as it grapples with other cuts. Mr. Vincent-Jones added that even a request could alienate the Board by suggesting insensitivity to other cuts.

- Mr. Johnson supported the plan. It is triage due to cuts that require a focus on core, life-saving services for as many as possible. *California Lawyer* just listed the 50 top firms that generate \$10 billion in annual revenue and urged HALSA to seek alternative funding from that sector.
- Ms. DeAugustine supported the plan. It is the best possible solution given current circumstances. She reminded the group of the real human toll, not only among consumers but among staff, like hers, who would have to be let go.
- Ms. Palmeros said we must all work together to get through this difficult time. She suggested streamlining forms like those to access Medical Nutrition Therapy, so clients can move through the process more quickly.
- Mr. Simon noted most speakers did not realize funds are gone or offer alternative allocations. He urged community education. He suggested small cuts to other services to bolster Psychosocial CM and tide over Legal Services.
- Mr. Liso reluctantly supported the plan. Peer Support was his lifeline and he has run groups five years. It can be volunteer-run. ASOs can support that. He also urged seeking new revenue streams.
- Mr. Goddard has volunteered and worked in the community since the 1980s. Serra Project and Aid for AIDS recently merged for cost efficiency. Agencies need to collaborate creatively. He feels all government funding will shift to favor broader populations, so agencies might need to serve non-HIV populations as well.
- Mr. Goodman was picked up within the decade, literally, off the streets, homeless and drug-addicted. Now President, Common Ground, which helped him, he oversaw their budget planning. He signed the last pay check of the case manager who helped him. He does not want to return to the 1980s, but he emphasized that decisions had to be made.

MOTION 3A (Goodman/Engeran-Cordova): Call the question (*Passed: 17 Ayes; 8 Opposed; 1 Abstention*).

MOTION 4: Approve revisions to the FY 2009 allocations, as presented (*Passed: 24 Ayes; 2 Opposed; 0 Abstentions*).

2. ***FY 2010 P- and A- Process Directives:***

- Mr. Goodman noted memorandums in the packet that: 1) report to OAPP the FY 2010 allocations approved at the 7/9/2009 Commission meeting; and 2) detail FY 2010 directives approved on this meeting's Consent Calendar.
- The regularly scheduled 8/25/2009 P&P meeting has been cancelled. Meetings have been scheduled for 9/1/2009 and, if needed, 9/8/2009, 1:30 to 4:30 pm, to review Year 20 allocations.

MOTION 5: Approve the FY 2010 Priority- and Allocation-Setting Process directives, as presented (*Passed as part of the Consent Calendar*).

B. Joint Public Policy (JPP) Committee:

1. ***State Budget Cuts:*** Mr. Engeran-Cordova indicated that an 8/8/2009 Policy Brief on budget cuts, along with memoranda from the Chief Executive Officer to the Board on Federal funding to counties and cities and on the State budget, were in the packet. He lamented that OA has not issued a budget implementation plan and encouraged pressuring them to do so.
2. ***Health Reform:***
 - Ms. Cross, Benefits Consultant, noted a resource list in the packet. The AIDS Foundation of Chicago website, www.aidschicago.org/advocacy/healthcare_reform, is collecting stories from PWH on what has and has not worked for them in the health care system. This helps publicize the issue, but they need West Coast contributors.
 - The HIV/AIDS Health Care Reform Grassroots Campaign is hosting twice monthly conference calls to update progress and take questions. Anyone can join the calls by following instructions on the resource list.
 - The National HIV Health Care Access Working Group 2009 Principles in the packet can be used to guide advocacy.
 - ➡ Ms. Cross will report on proposed subjects for staggered implementation and their potential effects.
2. ***Ryan White Extension:***
 - Mr. Baker said Ryan White sunsets 9/30/2009. Congress is in recess, so legislators can be reached at home offices.
 - Mr. Vincent-Jones said the Commission and OAPP are developing on the Ryan White Reauthorization/Extension to accompany the community consensus document. Some stipulations are critical, such as holding jurisdictions like the County harmless during the transition from code-based reporting.
 - Mr. Baker emphasized Federal resources are more important as State resources shrink. The House Energy and Commerce Committee is working on legislation, but has no draft and none has been sponsored. Health Care Reform is taking up most energy. While Ryan White might be included, reform is not expected to be launched until 2012.

MOTION 5A (Engeran-Cordova/Land): Send letter to Senators Feinstein and Boxer requesting assistance in passing Ryan White extension (*Passed by Consensus*).

C. Standards of Care (SOC) Committee:

1. ***Medical Outpatient Standard of Care:*** Dr. Younai reported that treatment education language has been strengthened to ensure service consistency. The standard is open for public comment until 8/31/2009.

Commission on HIV Meeting Minutes

August 13, 2009

Page 8 of 9

2. **DEFA Standard of Care:** She presented clarifications to the Service Introduction, Page 1, which note providers may seek outside funding and that, while funds are designed to provide temporary assistance, HIV is not currently curable.
3. **Grievance Policy and Procedure:** This item was postponed.
MOTION #6: Approve the Grievance Policy, as presented (*Withdrawn*).
4. **Medical Care Coordination TA:** Mr. Vincent-Jones said the consultant and TA transition team held its first meeting and will continue monthly meetings through December. A background PowerPoint from the first meeting was in the packet.

D. Operations Committee:

1. **Member Nomination:** Mr. Johnson welcomed new members and reminded all to be good mentors.
MOTION #7: Nominate Chris Villa for the District 1 consumer alternate seat, Everett Alexander for the SPA 5 consumer seat, and Tony Braswell for the District 3 representative seat and forward to the Board of Supervisors for appointment (*Passed as part of the Consent Calendar*).

20. CONSUMER CAUCUS REPORT:

A. Meet the Grantee Meeting Schedule:

- The SPA 5 “Meet the Grantee” was cancelled due to potential vigil conflict and low response. Next “Meet the Grantees” will be for combined SPAs 6 and 8 in Long Beach. A combined SPAs 4 and 5 meeting is planned.
- The meetings will be renamed, but a new name has not yet been chosen.

21. **PUBLIC HEALTH/HEALTH CARE AGENCY REPORTS:** There were no reports.

22. **TASK FORCE REPORTS:** There were no reports.

23. **SPA/DISTRICT REPORTS:** There were no reports.

24. **COMMISSION COMMENT:** There were no reports.

25. ANNOUNCEMENTS:

- Mr. Butler said “Care to Dine” will be 8/27/2009 in Long Beach. Twenty percent of proceeds go to St. Mary’s Care Clinic.
- Ms. DeAugustine announced Bonnie Lowenthal, Long Beach legislator and Health Committee member, has initiated a Town Hall on State cuts to HIV/AIDS. It will be 8/21/2009 at the Long Beach City Hall. She will forward details as available.
- Ms. Forrest announced the “3rd Annual One Gay at a Time” on 9/26/2009. The free night of LGBT comedy is hosted by the County HIV Drug and Alcohol Task Force and the LA Gay and Lesbian Center (LAGLC). Residential treatment programs can reserve blocks of seats by calling Farina at LAGLC, 323.860.7394. Ms. Forrest has emailed a flyer.
- Mr. Braswell announced the Executive Committee meeting scheduled after the Commission meeting has been cancelled.

26. **ADJOURNMENT:** Mr. Braswell adjourned the meeting at 2:30 pm.

- A. **Roll Call (Present):** Alexander, Aviña, Bailey, Braswell, Ballesteros, Butler, Daar, DeAugustine, Engeran-Cordova, Frye, Giugni, Goddard, Goodman, Johnson, Kochems, Land, Liso, Long, Negrete, Orozco, Page, Palmeros, Pérez, Peterson, Sayles, Sotomayor, Younai

Commission on HIV Meeting Minutes

August 13, 2009

Page 9 of 9

MOTION AND VOTING SUMMARY		
MOTION #1: Approve the Agenda Order.	<i>Passed by Consensus</i>	MOTION PASSED
MOTION #2: Approve the minutes from the July 9, 2009 Commission on HIV meeting.	<i>Passed by Consensus</i>	MOTION PASSED
MOTION #3: Approve the Consent Calendar with Motions 4 and 5 pulled.	<i>Passed by Consensus</i>	MOTION PASSED
MOTION #3A (Goodman/Engeran-Cordova): Call the question.	<i>Ayes:</i> Alexander, Bailey, Braswell, Ceja, DeAugustine, Engeran-Cordova, Goodman, Johnson, Kochems, Land, Liso, Long, Palmeros, Peterson, Sayles, Sotomayor, Younai <i>Opposed:</i> Aviña, Ballesteros, Giugni, Goddard, Negrete, Orozco, Page, Simon <i>Abstentions:</i> Butler	MOTION PASSED Ayes: 17 Opposed: 8 Abstention: 1
MOTION #4: Approve revisions to the FY 2009 allocations, as presented.	<i>Ayes:</i> Alexander, Aviña, Bailey, Ballesteros, Braswell, Butler, Ceja, DeAugustine, Engeran-Cordova, Giugni, Goddard, Goodman, Johnson, Kochems, Land, Liso, Long, Negrete, Orozco, Palmeros, Peterson, Sayles, Sotomayor, Younai <i>Opposed:</i> Page, Simon <i>Abstentions:</i> None	MOTION PASSED Ayes: 24 Opposed: 2 Abstentions: 0
MOTION #5: Approve the FY 2010 Priority- and Allocation-Setting Process directives, as presented.	<i>Passed as part of the Consent Calendar</i>	MOTION PASSED
MOTION 5A (Engeran-Cordova/Land): Send letter to Senators Feinstein and Boxer requesting assistance in passing Ryan White extension.	<i>Passed by Consensus</i>	MOTION PASSED
MOTION #6: Approve the Grievance Policy, as presented.	<i>Withdrawn</i>	MOTION WITHDRAWN
MOTION #7: Nominate Chris Villa for the District 1 consumer alternate seat, Everett Alexander for the SPA 5 consumer seat, and Tony Braswell for the District 3 representative seat and forward to the Board of Supervisors for appointment.	<i>Passed as part of the Consent Calendar</i>	MOTION PASSED